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APPLICANTS

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** CONTINUING DATA *****
 This application is a DIV of 09/927,130 08/10/2001 PAT 6,775,389
VERIFIED

** FOREIGN APPLICATIONS *****
NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/24/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>h</i>	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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ADDRESS
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TITLE
 In the ear auxiliary microphone for behind the ear hearing prosthetic

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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